

Docket Number (Optional)

REISSUE APPLICATION DECLARATION BY THE INVENTOR

1166/61926

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,764,724, granted June 9, 1998, and for which a

reissue patent is sought on the invention entitled METHOD OF MAKING X-RAY PHOTOGRAPHS OR EXPOSURES OR OTHER TYPE OF RADIATION SENSING, SUCH AS ELECTRONIC IMAGE STORAGE, AND A PATIENT TABLE HAVING A RECEPTOR UNIT FOR SUCH PHOTOGRAPHY, EXPOSURE OR IMAGE STORAGE,

the specification of which

is attached hereto.

was filed on _____ as reissue application number _____ / _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in
37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

- by reason of a defective specification or drawing.
- by reason of the patentee claiming more or less than he had the right to claim in the patent.
- by reason of other errors.

At least one error upon which reissue is based is described as follows:

1. The inadvertent failure to include method claims such as proposed reissue claim 76 that does not recite "swinging" the receptor unit, or "vertical axles in the regions of each side edge of the table," as recited in the sole independent method claim 1 of the original patent; and
2. The inadvertent failure to include apparatus or system claims such as proposed reissue claim 20 that does not recite "arms" and "a link," as recited in the sole "patient support table" claim 8 of the original patent.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)
1166/61926

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)

Registration Number

Ivan S. Kavrukov	25,161
Richard F. Jaworski	33,515

Correspondence Address: Direct all communications about the application to:

 Customer Number

	→
--	---

Place Customer Number Bar
Code Label here

OR

Type Customer Number here

<input checked="" type="checkbox"/> Firm or Individual Name	Cooper & Dunham LLP			
Address	1185 Avenue of the Americas			
Address				
City	New York	State	NY	ZIP 10036
Country	USA			
Telephone	212-278-0400	Fax	212-391-0525	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Carl-Eric Ohlson

Inventor's signature

Residence Same as Post Office Address	Date
Post Office Address Ostermalmsgatan 7, S-115, Stockholm, Sweden	Citizenship Swedish

Full name of second joint inventor (given name, family name)

Inventor's signature	Date
Residence	Citizenship

Post Office Address

Full name of third joint inventor (given name, family name)

Inventor's signature	Date
Residence	Citizenship

Post Office Address

Additional joint inventors are named on separately numbered sheets attached hereto.

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STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner:** Hologic, Inc.**Application No./Patent No.:** 5,764,724**Re-Issue Date:** June 9, 1998**Entitled:** METHOD OF MAKING X-RAY PHOTOGRAPHS OR EXPOSURES OR OTHER TYPE OF RADIATION SENSING, SUCH AS ELECTRONIC IMAGE STORAGE, AND A PATIENT TABLE HAVING A RECEPTOR UNIT FOR SUCH PHOTOGRAPHY, EXPOSURE OR IMAGE STORAGEHologic, Inc., a Corporation,

(Name of Assignee)

(Type of Assignee. e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- the assignee of the entire right, title, and interest; or
- an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

A. [] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. [X] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Carl-Eric Ohlson To: AO Medical Products ABThe document was recorded in the Patent and Trademark Office at
Reel 8532, Frame 0094, or for which a copy thereof is attached.2. From: AO Medical Products AB To: Hologic, Inc.

The document is submitted to the Patent and Trademark Office for recordal concurrently herewith.

3. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

[] Additional documents in the chain of title are listed on a supplemental sheet.

[X] Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

June 7, 2000
Date
SignatureGLENN P. MYHR
Typed or printed nameVICE PRESIDENT + TREASURER
Title

Please type a plus sign (+) inside this box →

PTO/SB/51S (02-01)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**SUPPLEMENTAL DECLARATION
FOR REISSUE
PATENT APPLICATION
TO CORRECT "ERRORS" STATEMENT
(37 CFR 1.175)**

Attorney Docket Number	1166/61926
First Named Inventor	Carl-Eric Ohlson
COMPLETE	
Application Number	09 , 590,633
Filing Date	06/08/00
Group Art Unit	2882
Examiner Name	David P. Porta

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	Family Name or Surname	
Carl-Eric	Ohlson	
Inventor's Signature	<i>Carl-Eric Ohlson</i>	Date
Name of Second Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	Family Name or Surname	
Inventor's Signature		Date
Name of Third Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	Family Name or Surname	
Inventor's Signature		Date
Name of Fourth Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	Family Name or Surname	
Inventor's Signature		Date

Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 1 of 1]

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